



DIVISION OF THE BIOLOGICAL SCIENCES  
AND THE PRITZKER SCHOOL OF MEDICINE

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Date: November 25, 2013

To: [info@hmprg.org](mailto:info@hmprg.org)

From: Janice L. Benson, MD-Vice Chair of Education  
On behalf of the Department of Family Medicine  
NorthShore University Health System/University of Chicago  
[jbenson@northshore.org](mailto:jbenson@northshore.org)

Re: Stakeholder input on 1115 Waiver

The Department of Family Medicine of the NorthShore University Health System/University of Chicago submits the following information to bolster support for the Illinois Medicaid Program's application for a comprehensive waiver to the Centers for Medicare and Medicaid Services granted under authority of Section 1115 of the Social Security Act. We have read the current draft of the concept paper for this waiver entitled "The Path to Transformation" and offer the following comments.

First, the fourth pathway for "Workforce" is key to the success of increasing the number of primary care physicians practicing in Illinois. We support the re-establishment of a Medicaid GME program in Illinois but this program must be different than previous versions in the past in order to satisfy the increasing workforce needs in Illinois. We support that a new iteration of a Medicaid GME program in Illinois should be directed to the support of residency programs that produce primary care physicians and should monitor the success of such directed incentives over at least two years after the completion of residency training (Patterson S et al Acad Med 86(5):605-608, May 2011. Residents who train in public safety net systems are more likely to practice in underserved settings and Federally Qualified Health Centers (FQHCs) and that has been our experience in Illinois, too. (Phillips RL, et al Acad Med 88: advance online, Oct 2013, doi10.1097/ACM.0000000000000025). Family Medicine residencies produced primary care physicians in large percentages compared to other specialties, estimating primary care practice rates of 91% for Family Physicians, 44% for Pediatricians, and 10-20% for Internal Medicine graduates. (See the COGME 20<sup>th</sup> report, page 17, Figure 4 Summary 2010 data.)

The Department of Family Medicine of the University of Chicago/NorthShore University Health System is interested in the Teaching Health Centers initiative. We are exploring options to collaborate with community FQHC partners to establish a new center on the south-side of Chicago and considering expanding a residency track in the northern

suburbs of Cook County and Lake County. However, the monies that support this federal initiative however, are not robust enough to support the costs after the initial 2-5 year implementation grant period. The reintroduction of an Illinois GME benefit would foster the development of more successful collaborations and a more secure primary care workforce pipeline if these monies were directed to the Teaching Health Centers or other primary care residency training that occurs in FQHCs and FQHC-look-a-likes. This extra support through time would help us develop these training centers more quickly and securely.

Furthermore, the benefit of these collaborations between Academic Health Centers and Federally Qualified Health Centers go beyond improving access and services in the community with resident physicians. The Teaching Health Centers become model demonstration centers to show residents AND medical students how meaningful and rewarding a career in primary care can be in serving the community. The residents and students learn to deliver care in the team-based approach to serve the needs of patients, families and communities. FQHCs are also leaders in developing real Patient-centered medical homes in our communities and have a population health orientation. In summary, we support the waiver to help create all four arms of the Pathway to Transformation. Please let us know if there are additional ways we can support this request.

Sincerely,

A handwritten signature in black ink, reading "Janice L. Benson". The signature is fluid and cursive, with a long horizontal stroke at the end.

Janice L. Benson, MD

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